

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 24D1043439	(X3) Date Survey Completed 11/08/2019
Name of Provider or Supplier Southside Community Health Services	Street Address, City, State 324 East 35th Street, Minneapolis, MN	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

(X4) ID Prefix Tag	Summary Statement of Deficiencies
D0000	The Southside Community Health Service laboratory was found to be in substantial compliance with the regulations of the Clinical Laboratory Improvement Amendments of 1988 (42 C.F.R. part 493, effective April 24, 2003) upon completion of the recertification survey performed on November 8, 2019. No deficiencies were cited.